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CONFIRMATION NO. 4154

<b>SERIAL NUMBER</b> 10/757,489	<b>FILING OR 371(c) DATE</b> 01/15/2004 <b>RULE</b>	<b>CLASS</b> 345	<b>GROUP ART UNIT</b> 2629	<b>ATTORNEY DOCKET NO.</b> 453/04890	
<b>APPLICANTS</b> Haim Perski, Hod Hasharon, ISRAEL; Meir Morag, Tel Aviv, ISRAEL; <b>** CONTINUING DATA *****</b> This appln claims benefit of 60/501,484 09/05/2003 and claims benefit of 60/446,808 02/10/2003 <b>** FOREIGN APPLICATIONS *****</b>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> ** 04/15/2004					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <u>                    </u> Allowance <u>                    </u> Initials <u>                    </u>		<b>STATE OR COUNTRY</b> ISRAEL	<b>SHEETS DRAWING</b> 18	<b>TOTAL CLAIMS</b> <del>49</del> 42	<b>INDEPENDENT CLAIMS</b> <del>7</del> 1
<b>ADDRESS</b> 44909					
<b>TITLE</b> Touch detection for a digitizer					
<b>FILING FEE RECEIVED</b> 1373	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		